

1050

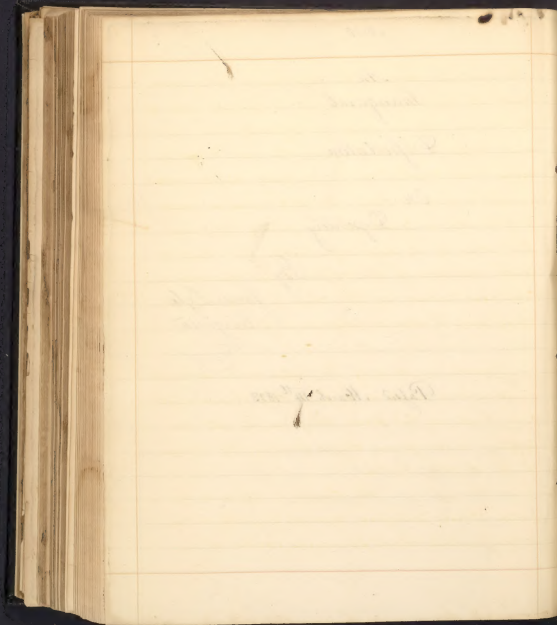
#14

An  
Inaugural  
Dissertation

On  
Dysentery

By  
James Lyle  
Virginia

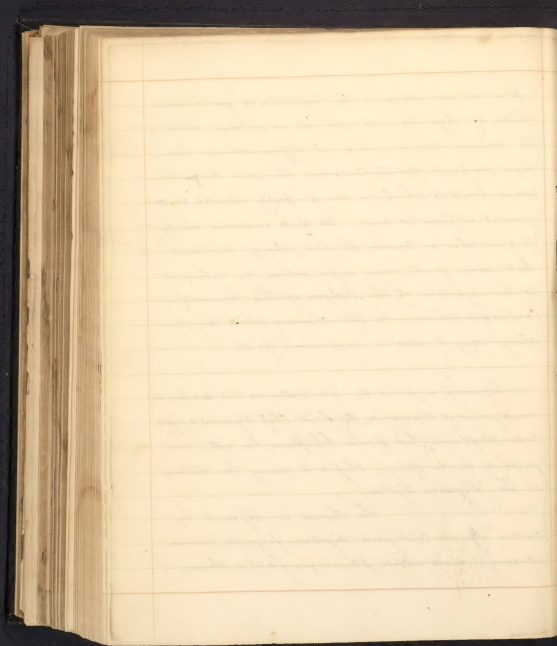
Read March 14<sup>th</sup> 1823



1  
It is not our design in this Dissertation to give a minute history of Dysentery or to enter into an elaborate detail of the various remedies which at different times have been proposed for its cure, were this our design the narrow limits to which we are necessarily restricted would prevent us from so doing. We shall endeavour mainly to give what we consider the best plan of treatment but aware of its many imperfections, we submit it to the inspection of the Professors of this University in confident reliance on that clemency which they are always ready to extend to inexperienced youth.

Dysentery is placed by Dr Cullen in his Nosological arrangement of diseases in the first Class Pyrexia & fifth order Profluvia, but Doctor Chapman has with more propriety in our opinion, placed it among the diseases of the Digestive System.

*Definitio.* The disease is defined by Cullen "Pyrexia contagiosa; dejectiones frequentes, mucosae vel sanguinolentae, retentis plerumque facibus albinis;

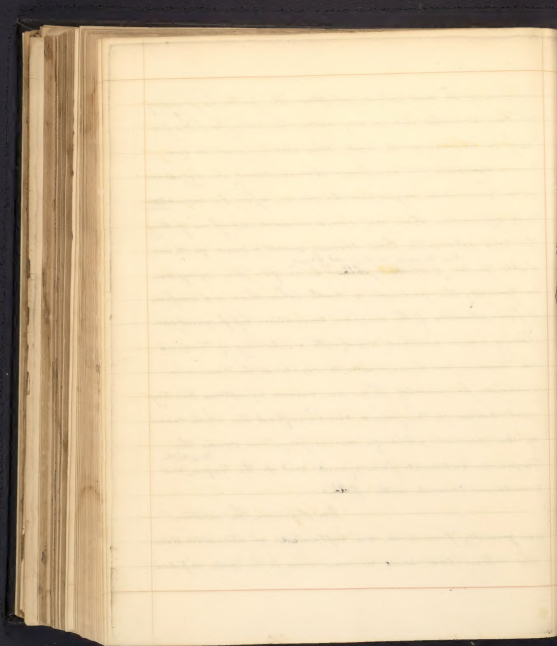


*tenesmus, tenismus*." This we consider as correct a definition  
 of the disease as any to be found except perhaps with regard  
 to its contagious nature. On this point there is a variety of  
 opinions tho a majority of authors seem disposed to deny  
 to it this property. Dysentery is most frequently ushered  
 in with the usual symptoms of Fever, its wit, a chill suc-  
 ceeded by flashes of heat and frequency of pulse, which sym-  
 ptoms are soon followed by others peculiar to the disease as  
*tenesmus, tenismus* &c. The *tenesmus* and *tenismus* are in some  
 instances preceded by loss of appetite nausea vomiting &  
 costiveness. The disease sometimes comes on with diarrhoea  
 which in a short time assumes the form of dysentery. As the disease  
 advances the *tenesmus* & *tenismus* become more frequent & severe  
 in consequence of which, a portion of the rectum is not  
 infrequently protruded. The discharges are in most cases  
 at first composed of a frothy mucus mixed with blood  
 and small lumps of hardened faeces resembling cheese  
 and in some cases hæmorrhage of pure blood takes place  
 from the Arteries. When these hardened lumps of faeces are  
 discharged (denominated *Scybala*) there is generally a short



remission of the most violent symptoms. The pulse in a majority of cases is neither fuller nor very active. Dysentery is but a few days in arriving at its height. When left to pursue its own course unmodified, the symptoms above mentioned are aggravated in a considerable degree, and the disease assumes a more alarming appearance. Then, are added unusual depression of strength, cold extremities, cold clammy sweats, a small quick and feeble pulse, <sup>in the more malignant forms,</sup> ~~protruding~~ <sup>apothecaries</sup> hiccup. These symptoms are generally the precursors of death. When there is a remission of fever, relaxation of the surface, evacuations less frequent, and assuming a more natural aspect, with a subsiding of tormina and tenesmus, we have reason to conclude the case will terminate favourably. There are various symptoms denoting great disease of the primæ viæ throughout the whole course of the disease. A tough mucus frequently covers the tongue — internal fauces, and root of the tongue, <sup>which</sup> are sometimes covered with ~~apthæ~~.

On dissection, the intestines are generally found in an inflamed or ulcerated state. The villous coat seems, in some cases, to be quite discoloured.





The disease seems to affect principally the large intestines. The inflammation frequently extends to the Stomach, Liver & other organs, which subserve the purpose of digestion and nutrition. The Causes giving rise to the Complaint are various. Some Authors have supposed contagion generated in the system of the individual and from him communicated to others to be the most common cause, tho' we are diffident in evidence going to prove the contagious nature of the disease. The disease frequently prevails as an Epidemic, arising from a common origin, and when this is the case, its production is to be attributed to some unknown distemperature of the Atmosphere.

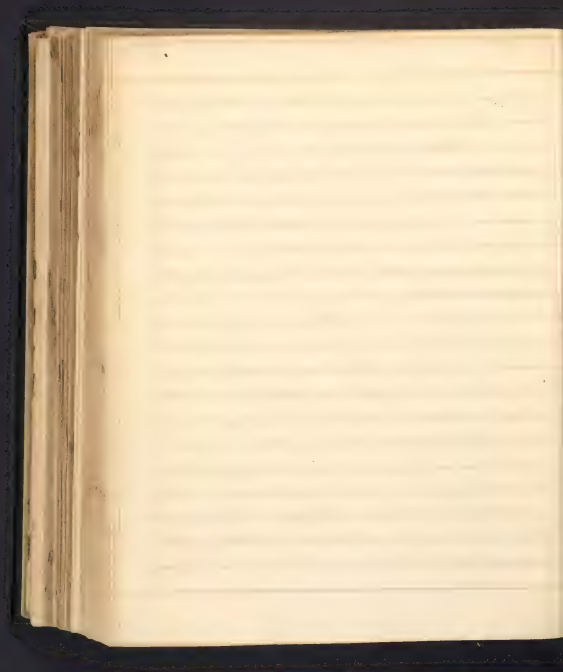
Sudden alterations of heat and cold checking perspiration or cold in any way applied to the body producing this effect may act as an exciting cause of the disease. Sydenham, with a number of respectable authors, supposed the disease to be fever thrown on the intestines. Whether this be a correct pathological view of the disease I am not competent to decide; it is at least certain that the disease sometimes assumes a Remittent course.

The first thing I noticed when I stepped  
out of the car was a warm blanket of  
sun on my face. The air was thick with  
the scent of blooming flowers, a mix of  
jasmine and lilacs. I took a deep breath,  
savoring the fragrance. The world around  
me seemed to be in a state of perfect  
harmony. The birds were singing their  
hearts out, and the children were laughing  
joyfully. It was a beautiful scene, one  
that I had never before. I felt a sense  
of peace and contentment that I had  
never experienced before. The sun was  
shining brightly, and the sky was a  
deep, clear blue. The clouds were soft  
and white, drifting lazily across the  
sky. The overall atmosphere was one  
of tranquility and joy. I felt like I  
had found a hidden gem, a place where  
time stood still and the world was  
perfect. I was in luck, indeed. This  
was the best day of my life.

being an intermittent, and at other times a continued form. Doctor Chapman supposes the disease to originate in most instances in the stomach and always in that organ when occasioned by marsh effluvia. In this section of Country (Southern part of Virginia) the disease is most commonly complicated with the bilious fever of our climate, and in this case the Liver is generally deeply involved as is plainly manifested by the inordinate secretion of bile.

Treatment. If what we have

said respecting the nature of Dysentery be correct, the treatment must necessarily be obvious. The disease should be considered under its various modifications in order that we may be enabled to apply the means necessary for its cure. The first indication presenting itself is to subdue inflammation and overcome the constriction or spasm of the intestines, and by this means, procure natural evacuation and determine to the surface. Venesection is to be prepared to all other means for the purpose of subduing inflammation. It is not only of great advantage as an anti-



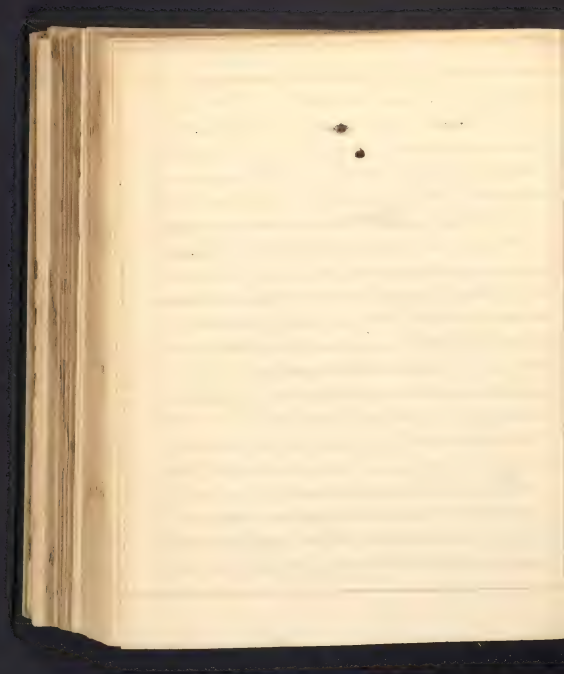
inflammatory agent but is a mean well calculated to remove  
 spasm and prepare the system for the reception of other  
 necessary remedies. To remove the constriction or spasm  
 of the intestines which seem the principal Cause why our  
 remedies are so tardy in their Operation, blood-letting is  
 highly serviceable. It is also calculated to remove what  
 Cullen calls "Spasm of the extreme vessels" and by this  
 means exchanges a hot and dry surface for one of a  
 moist and equable temperature. We will probably find  
 that B. S. cannot be carried to any considerable extent  
 in this disease the the pulse, <sup>the degree of pain,</sup> in this as in most cases  
 of inflammation should be our principles guide.

It was the practice of the celebrated Sydenham to  
 commence the Cure of Dysentery by the administration  
 of an Emetic, and practitioners of considerable eminence  
 of the present day, rely on this Class of Medicines  
 with considerable confidence. In cases where the  
 stomach is loaded with foul accumulations of vitu-  
 alized bile & half digested food, occasioning, nausea  
 vomiting and other unpleasant symptoms, there would



probably be a propriety in administering an emetic  
 before cleansing the stomach. It would probably be of  
 service by the tendency it has of relaxing the muscles.  
 Having accomplished this much by the lancet emetics  
 we would in the next place endeavour to open the  
 bowels. The purgative we think well calculated to fulfil  
 all this indication is Calomel. The influence of stirring  
 in correcting the secretions, would seem to point out  
 the propriety of resorting to its use in this disease when  
 complicated with bilious symptoms. When there is  
 an absence of these symptoms Rucini Ollum or  
 Pulv. Albi or some of the Neutral salts, will answer a  
 good purpose, but even here, we are not satisfied  
 that they answer better than Calomel.

Calomel & Rhubarb conjoined constitutes an excellent  
 purgative in this disease. When this medicine <sup>is</sup> tardy  
 in ~~the~~ <sup>these</sup> operation, we would administer Rucini Ollum  
 or what we have seen answer this better Magnesia  
 Calomel, in conjunction with the Sulphate. A table  
 spoon full of this combination given every hour or two





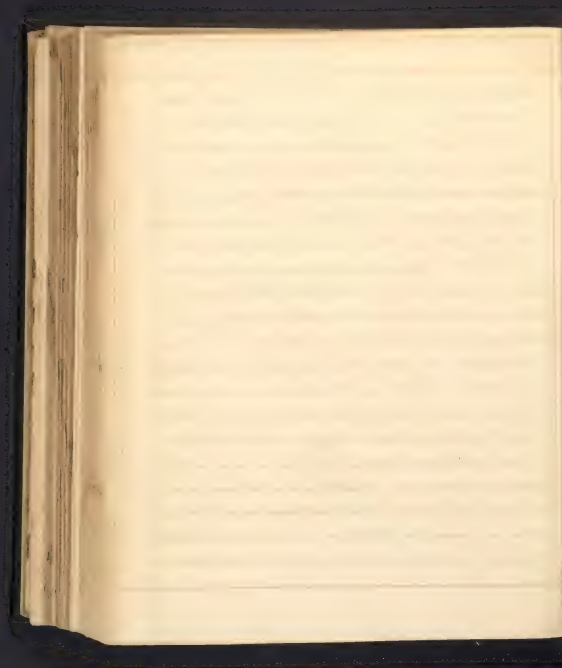
will purge actively, and lie better on the stomach in case of bilious vomiting than any purgative with which we are acquainted and is admirably calculated to remove bile.

Owing to the extreme excitability of the stomach, and violent griping, in this disease, we will frequently find Emetics of the highest importance. By their use we frequently have it in our power to relieve some of the most distressing symptoms of the disease & provide the operation of purgatives, tho we would not use them to the exclusion of cathartics. It is generally agreed by physicians and laid down as a rule seldom to be departed from, that purgatives should be continued until the evacuation from the bowels assumes a natural aspect. The tormina & tenesmus we believe to be in general occasioned by the vitiated bile and mucus remaining in the intestines, and these symptoms are seldom removed till what we consider their exciting cause is overcome.

The means we think best suited to calm irritation is Opium in combination with other Medicines



Is written with a number of distinguished authors object to the  
 its use in the early stage of Dysentery. It will probably be  
 thought presumptuous in me to offer my opinion in opposition  
 to such high authority, but the good effects which we have  
 witnessed resulting from its use, we think, warrant us in  
 recommending its use before the inflammatory symptoms  
 have been subdued. We are frequently compelled to have  
 recourse to anodynes for the purpose of allaying the  
 severe griping incident to the disease till purgatives,  
 which are later in producing their effects, can oper-  
 ate, and by this means, remove the exciting cause.  
 The propriety of resorting to Diaphoretics in this disease  
 is admitted as far as my limited information extends  
 by most practitioners of this Country, and has been  
 highly extolled by some European authors, but an  
 author, who seems to place the most reliance on this  
 plan of treatment is entirely in his valuable work  
 on tropical climates. This author supposed the disease  
 to be occasioned by the checked secretion of the cutaneous  
 exhalation and from this view of the disease was



naturally led to the Employment of Diaphoretics, which we are informed answered exceedingly well, The pathological views of Morley are similar to those of Sydenham, who as has already been said, supposed it to be fever thrown on the intestines, When the disease is occasioned by checked perspiration, as we think it sometimes is, diaphoretics will be found to answer a good end, but we would use other remedies which will increase their utility. We have seen the following combination to answer exceedingly well as a diaphoretic & purgative

R<sup>x</sup> Spicacuanha gr. 1  
Calomel gr. 2  
Gum. Opii ʒss

a pill or powder containing this quantity, repeated every two three or four hours, according to Circumstances.

Should the Spicacuanha excite nausea, and vomiting we should lessen the quantity, Where the tormina are considerable the quantity of Opium may be increased, This formula we have seen act efficaciously as a diaphoretic, operating sufficiently on the bowels, Calming irritation & composing



to sleep

Considering how deeply the liver is frequently involved in this disease much benefit is derived from the administration of Calomel in small doses. We should indeed feel un-able to combat with Dysentery as it most frequently occurs with us, deprived of Mercury. There is seldom much amendment in the case before considerable impregnation is made on the liver by a Mercury. We think it seldom necessary to produce ptyalism in the first stage of the case before us, but consider it of importance to continue the use of Mercury several days in succession. The Dover's powder is frequently used with advantage, but we should think it most serviceable after the bowels more than fully evacuated, and the inflammatory symptoms are subdued. We should think it best suited to those cases where there is an absence of the bilious symptoms just mentioned.

Spica has been considered by some physicians a specific in Dysentery. The good effects resulting from its use are ascribed by Haller to its purgative operation, but the medicine possesses this property in so small





a degree, if at all, that we are disposed to attribute its good effects with *Ess. Chapmanii* & some specific or peculiar property which it possesses, or with a Morbidity to the salivation & perspiration which it occasions. It has been thought by some best suited to those cases where there is a considerable discharge of blood from the Muc. amounting almost to a hæmorrhage, tho' it will probably be found highly beneficial under almost any circumstances of the Case.

In cases where there was a redundancy of blood present the following formula has been found advantageous

*Rp* *Stemur* ꝑ*ss* XXIV

*Calomel* ꝑ*ss* XXIV

*Magn. Cal.* ʒ*j*

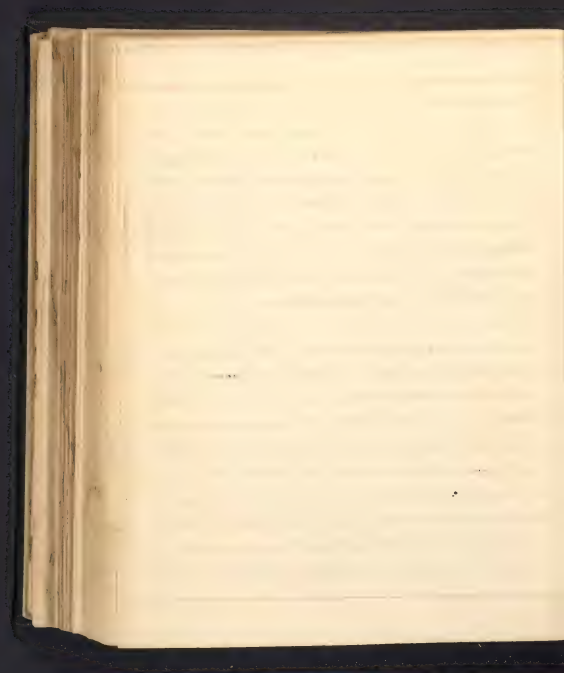
Made into 12 powders

one of which we would give every two, or three hours, as occasion may require.

The antimonials have been highly spoken of by some writers, having never seen them and we are unable to say any thing respecting their use. It is possible some may occur where they will be found useful.







Directly see the seat of the disease and is corroborated by various  
 lower morbid signs. Some have reported blisters when appl-  
 ied to the Abdomen, prove very distressing to the patient  
 while going to stool. The pain and inconvenience to which  
 the patient is subjected, can we believe be borne much better  
 than is generally imagined, & we should not be deterred  
 from doing what we consider of such importance by any  
 very trivial objections which may be raised. In violent  
 cases of the Disease a blister applied large enough to cover  
 the whole Abdomen will be found exceedingly efficacious.  
 They frequently act like a charm in relieving some of  
 the most distressing symptoms incident to the Disease.

The *termina* & *transiens* symptoms which are more out-  
 set towards the close of the Disease require that something  
 should be done for their removal. Spasmodic inflammation in  
 various states of Intermittence have generally been recommended  
 in this purpose. An antispasmodic regimen given by either  
 Chapman's Intermittent, has I can assure you, proved

R. Pul. Rhei ℥ss gr  
 Sp. ac. ℥ss



gam. spec. 11 grs

℞ Cinnamon V gutt

gam. Herb. ʒ. 5. ft. half ʒ. in p. X

the 2<sup>nd</sup> every two or three hours

To relieve the griping

Oleaginous mixture has been found serviceable the  
Sedative is the formula for making it

℞ ℞ Resins ʒj

gam. Herb. ʒij

Tarshae. Alb. ʒij

Sweet. Oil 50℞℞ 60 gutt

Ag. menth. oil Commamon ʒij a table  
spoonful to be given every two or three hours as may  
seem necessary. It is serviceable to the 2<sup>nd</sup> in present  
seasons but principally on account of its emollient  
on the stomach. Expectorants of thick matter have been  
recommended & will probably be found to answer  
well. Anodyne enemata are important at this period  
of the disease, and will be found to relieve the  
torment - Commamon as readily as any other means with





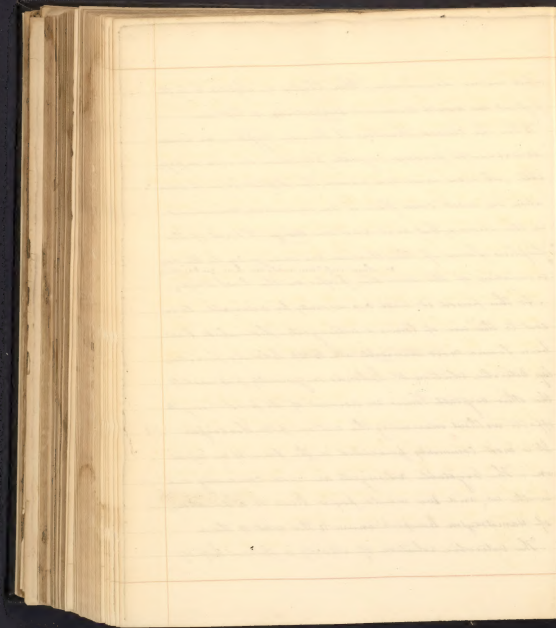
which we are acquainted. When Clysters are objected to by the patient we would recommend Suppositories of Opium.

When the disease threatens to become typhoid we would endeavour to produce a gentle ptyalism as soon as possible. As soon as we can perceive the slightest sign of salivation in most cases, there is an invincible amendment in the disease, but as it is not our design to treat of the typhoid form of the disease, we will go on to the consideration of the remedies proper in the last stage, <sup>or when inflammation has subsided</sup>.

At this period it will occasionally be advisable to resort to the use of tonics & astringents. Those which have been found most serviceable are Bark, Colombo, Kino, & Stoebe. Vitrolic solution of Colombo is generally preferred to the other acceptable tonics on account of its producing its effects without increasing the action of the blood vessels.

It is most commonly prescribed in the form of an infusion. The vegetable astringents are most commonly used with us, and we would prefer Kino or a decoction of Hamamelon Campechianum to the most of them.

The vitric solution of alcohol is spoken highly



of some practitioners, but is generally objected to on account of its affecting the Stomach, which in most of the bowel affections, is very delicate.

During the whole course of the disease it is of great importance to pay particular attention to the diet of the patient. It should consist of the most mild articles, such as Sago, Arrow-root, Peppercorn, rice, panada &c. The drinks should be for the most part mucilaginous and tepid. When the inflammatory symptoms of the disease have been subdued and debility seems the principal part of the disease, the articles above-mentioned may be exchanged for others more nutritious.

It will appear quite evident that we might have extended this dissertation to a much greater length, but as we are only acting in compliance with the regulations for a degree in Medicine we submit the preceding remarks hoping ~~that we may~~ to attain the end we have in view.

Geo. Lyle

